

Incident Report

Print Date/Time: 07/21/2016 09:06

Login ID: ss0143

Lake Stevens Police Department

ORI Number: WA0311900

Incident: 2016-00013264

Incident Date/Time: 7/9/2016 1:05:06 PM

Location: 20TH ST NE / 125TH AVE NE

LAKE STEVENS WA 98258

Phone Number: (425) 512-3105

Report Required: Yes
Prior Hazards: No
LE Case Number:

Incident Type: Collision
Venue: Lake Stevens

 Source:
 911

 Priority:
 3F

 Status:
 3

Nature of Call:

Unit/Personnel

Personnel
SS0126-Hingtgen
SS0127-Adams
SS0131-Wells
SS0079-Summers

Person(s)

No.	Role	Name	Address	Phone	Race	Sex	DOB
1	Reporting Party	SLATER, PATRICIA JO	2932 77TH DR	(425) 319-3919	White	Female	08/22/1945
2	Reporting Party	MARTINEZ, SHELBY D	3336 116 AVE	(425) 512-3105		Male	05/10/1987
1	Driver	BOEKENOOGEN, RICHARD MAX	11117 20TH ST	(360) 384-4805		Male	07/24/1929
			Lake Stevens WA 982588142				
2	Driver	JOHNSON, THERESA LEILANI	4428 67TH AVE			Female	09/06/1979
			Maryovilla W/A 002700002				

Marysville WA 982708803

Vehicle(s)

Role 1	Гуре	Year	Make	Model	Color	License	State
Involved Vehicle						0717UX	WA
Involved Vehicle						255XQU	WA
Involved Vehicle						915ZSF	WA
Involved Vehicle						AUU2678	WA

Disposition(s)

Disposition Count

Property

Date C	Code T	уре	Make	Model	Description	Tag No.	Item No.
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CAD Narrative

07/13/2016: 08:32:04 SP0168 Narrative: DRIVER EVALUATION REQUEST SUBMITTED FOR DRIVER OF VEH 1

07/09/2016: 13:39:43 ss0126 Narrative: Vehicle 1 contact # 360-384-4805

07/09/2016 : 13:26:05 SP0326 Narrative: TOW OS 07/09/2016 : 13:18:22 sp0251 Narrative: 4 GREEN PTS

07/09/2016 : 13:17:54 SP0326 Narrative: RESCUE TOW ER FOR L/915ZSF 07/09/2016 : 13:16:30 SP0326 Narrative: RESCUE TOWING OWNERS REQ

07/09/2016: 13:11:37 SP0326 Narrative: REQ AID FOR EVAL 6 YO AND MOM INVOLVED IN COL**

07/09/2016: 13:08:39 SP0370 Narrative: Narrative added from associated Call #: 106 - SAME CALL AT CFS 108

07/09/2016: 13:08:00 SP0370 Narrative: Narrative added from associated Call #: 106 - LR370

07/09/2016: 13:07:40 SP0370 Narrative: Narrative added from associated Call #: 106 - RP IS CHECKING ON HIM, NON INJURY

07/09/2016: 13:07:09 SP0413 Narrative: BLKG EB LANE, RP WITNESS, LR413

07/09/2016: 13:06:46 SP0413 Narrative: BLU 90S PU W TRAILER, WHI SEDAN W BLU TOP

07/09/2016: 13:06:15 SP0413 Narrative: SIL SEDAN HIT 1 VEH AND TRIED TO FLEE SCENE THEN HIT ANOTHER VEH 07/09/2016: 13:06:12 SP0370 Narrative: Narrative added from associated Call #: 106 - AC, NOW, ELDERLY M HIT 2 VEHICLES, NOW PULLED OVER L/915ZSF

07/09/2016: 13:05:48 SP0413 Narrative: CC, NOW, 3 VEH COL, NON INJ, BLKG TRF AND DEBRI IN RDWAY

COLLISION REPORT 16-00013264, 070916

	STATE OF WASHINGTON POLICE TRAFFIC COLLISION REPORT 1501071	2 3 27
	INTERSTATE CITY STREET V FIRE CI	
1 1	STATE ROUTE OTHER OTHER CODING CODING 0664	
2 1	TRIBAL RESERVATION COUNTY RD PRIVATE WAY INVOLVED INVOLVED INVOLVED TOTAL # OF UNITS OBJECT STRUCK	1 8 28
3 1	M M D D Y Y Y Y TIME (2400) COUNTY # MILES CITY # 2 DATE OF COLLISION 07 - 09 - 2016 1305 31 S W OF 0664 3	
4	ON (PRIMARY TRAFFIC WAY) INTERSECTION NON-INTERSECTION	
4a 4a	20TH ST NE BLOCK NO. V MILE POST 12500	0 1 29
5	DISTANCE OF (REFERENCE OR CROSS STREET) MILES N E W FEET S W	
	UNIT 01 MOTOR VEHICLE PEDAL- CYCLE DAMAGE THRESHOLD MET VES NO DAMAGE THRESHOLD MET VE	1 30
6 2	LAST NAME BOEKENOOGEN FIRST NAME RICHARD MIDDLE INITIAL M	
	STREET NEW ADDRESS 11117 20TH ST NE UNIT F2	
7	CITY LAKE STEVENS ST WA ZIP 982588142	1 2 31
8	CDL RESTRICTIONS ENDORSEMENTS 2	
9 9	DRIVER'S LICENSE # BOEKERM717M4 STATE WA SEX M D.O.B. MMDDYYYY 07 _ 24 _ 1929	
10 9	ON DUTY STATUS AIRBAG 9 RESTR. 9 EJECT 1 HELMET 2 INJURY 1 NATURE OF INJURIES	1 2 32
11 2 5	LICENSE PLATE # 915ZSF STATE WA VIN# 4T1BK3EK4AU109937	\perp
12 2 5	TRAILER PLATE # STATE TRAILER PLATE # STATE	
13 4	VEH. YEAR 2010 MAKE TOYT MODEL CAM4D STYLE 4D VEHICLE TOWED YES NO TOWED BY REGISTERED OWNER INFO. RICHARD BOEKENOOGEN 11117 20TH ST NE UNIT F2 LAKE STEVENS WA 98258 VEHICLE NO. 1	
14 4	LIABILITY INSURANCE INSURANCE CO 8 POLICY # PEMCO CA0186131 INSURANCE CO 9 TOP 10 TO	
15 2	VEHICLE YES NO CITATION # CHARGE CHARGE CHARGE	34
16 2	UNIT 02 MOTOR PEDAL- PEDESTRIAN PROPERTY DAMAGE THRESHOLD MET PHONE 9 9 OWNER	35
	LAST NAME JOHNSON FIRST NAME THERESA MIDDLE INITIAL L	36
17	STREET 4428 67TH AVE NE	37
18	CITY MARYSVILLE ST WA ZIP 982708803	38
19	CDL RESTRICTIONS B ENDORSEMENTS	39
20	DRIVER'S LICENSE # JOHNSTL2110F STATE WA SEX F D.O.B. MMDDYYYY 09 - 06 - 1979	
21	ON DUTY STATUS AIRBAG 9 RESTR. 4 EJECT 1 HELMET 2 INJURY 7 CLASS 7 NATURE OF INJURIES HEAD HURT	
22	LICENSE PLATE # 255XQU STATE WA VIN# 1G6KD54Y9XU746043	
23	TRAILER PLATE # STATE TRAILER PLATE # STATE 1	41
24	VEH. YEAR 1999 MAKE CADI MODEL DEVILLE STYLE VEHICLE TOWED BY GOVERNOUS INCLUDED BY REGISTERED OWNER INFO.	42
	SHADE IN DAMAGED AREA UABILITY INSURANCE CO AMERICAN FAMILY 231010410226FPPAWA	
25	VEHICLE YES NO CITATION # CHARGE CHARGE TO BOTTOM 8 7	
26	OFFICER'S NAME (PRINT) N. ADAMS BADGE OR ID # AGENCY WA0311900 AGENCY WA0311900	
	PART A 3000-345-159 R (7/06)	





CORRECTION

REPORT NO.

E563154

CAS

2016-00013264

13919/2 JOHN 13919/2														
					RSONS INVOLV	ED (PASSENG	ER\$ AND/	ATIW AC	ESSES C	ONLY)				
NAME (LAST, FIRST, MIDDLE INITIAL) MACCORMACK STELLA I														
ADDRESS & PHONE #	4428 67TH	AVE NE	MARYSVII	LE WA 9827	0 4257371262			SEX	F D	O.O.B. DDYYYY 11	_	07]-[2010
PASSENGER V	VITNESS	UNIT #	2	SEAT POS. 7	AIRBAG 9	RESTR. 8	EJECT	1 HE	MET 2	INJURY CLASS 1		NATURE	OF INJUR	RIES
NAME (LAST, FIRST, MIDDLE I	NITIAL)	MAF	RTINEZ SI	HELBY D										
ADDRESS & PHONE #	3336 116	AVE NE L	AKE STE	VENS WA 98	258 4255123105			SEX	M D	0.O.B. DDYYYYY 05	_	10]-[1987
PASSENGER V	WITNESS 🗸	UNIT #		SEAT POS.	AIRBAG	RESTR.	EJECT	HE	MET SE	INJURY CLASS		NATURE	OF INJUF	RIES
NAME (LAST, FIRST, MIDDLE I	NITIAL)	SL	ATER PA	TRICIA J										
ADDRESS & PHONE #	2932 77TI	H DR NE	MARYSVIL	LE WA 9827	70 4253193919			SEX	F D	0.O.B. DDYYYY	_	22]-[1945
PASSENGER V	VITNESS 🗸	UNIT #		SEAT POS.	AIRBAG	RESTR.	EJECT	HE	MET SE	INJURY CLASS		NATURE	OF INJUF	RIES
					N	ARRATIVE								
					I times app of Lake S		e), I res	ponc	ed to	a three	e ca	r colli	sion	in the
					ng eastbou ded into the							pass	ed t	hrough
of Vehicle	e 3 (LIC	: AUL	J2678)	, which	d continue towed a tra rith plate of	ailer (LIC:	: 0717l							
Vehicle 1 3, and wa		-	_		locking tra	ffic where	e it can	ne to	rest,	after it o	colli	ded v	vith	Vehicle
I CERTIFY (DECLA	RE) UNDER F	ENALTY O	F PERJURY	UNDER THE	LAWS OF THE STA	TE OF WASHING	STON THAT	THE FOR	EGOING	IS TRUE AND	COR	RECT. (RO	CW 9A.	72.085)
N. ADAMS	annie	T. 105			NOT BET	_	02:48 PM	_	BI 4 == -	VIOLUED.				
INVESTIGATING OFF	ICER'S SIGNA	ATURE		UNIT OR I	DIST. DET	DATED	I r	DATE	PLACE S	SIGNED				
BOB SUMMERS	0079								3/2016 5	5:10:28 PM				
BADGE OR ID #	0127		ORI#	WA031190	00	Т	IME POLICE DI	ISPATCHED	1:06 PI	и -	ΓIME P	OLICE AR	RIVED	1:10 PM





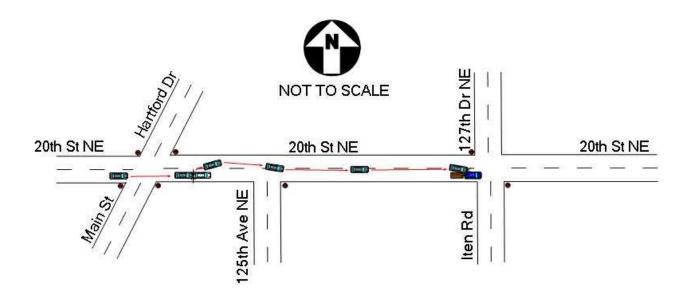
		REPORT NO.	E563154
012197	CASE #	2016-00013264	

	SUPPLEMENTAL POLICE TRAFFIC COLLISION REPORT NO. E563154	1 1
		2
]	COMMERCIAL MOTOR CARRIER INTERSTATE INTERSTATE	
]]	UNIT # USDOT ICC# VEHICLE TYPE CARGO BODY TYPE	3
	CARRIER NAME	
	CARRIER ADDRESS	2
-		3
]	NAME # CAMP PLACARD NAME IF NO NUMBER	
]	ADDITIONAL UNITS	0
]	IINIT # 3 MOTOR PEDAL- PEDESTRIAN PROPERTY DAMAGE THRESHOLD MET PHONE	
J	LACT NAME	
	STREET -	
]	NEW ADDRESS 2419 SOPER HILL RD	
J	CITY LAKE STEVENS ST WA ZIP 982584205	
1	CDL RESTRICTIONS ENDORSEMENTS	1 1
] 1	DRIVER'S LICENSE # MACCOSI221PK STATE WA SEX M D.O.B. MMDDYYYY 10 - 12 - 1978	2
]	ON DUTY STATUS AIRBAG 9 RESTR. 9 EJECT 1 HELMET 2 INJURY 1 NATURE OF INJURIES	3
	LICENSE PLATE # AUU2678 STATE WA VIN# 1G8EK18H4FF192832	
]	TRAILER TRAILER	
5		2
	REGISTERED OWNER INFO. SETH MAC CORMACK 2419 SOPER HILL RD LAKE STEVENS WA 98258 SHADE IN DAMAGED AREA	3
ļ.	LIABILITY INSURANCE INSURANCE CO & POLICY#	FROM
	VERICLE YES NO CITATION # CHARGE CHARGE CHARGE	7
	UNIT # MOTOR PEDAL- PEDESTRIAN PROPERTY DAMAGE THRESHOLD MET VES NO PHONE	FROM
	LAST NAME FIRST NAME MIDDLE INITIAL	4
	STREET NEW ADDRESS	
,]	CITY ST ZIP	
]	CDL RESTRICTIONS ENDORSEMENTS	
	DDIVEDIC DOD	
]	LICENSE # STATE SEA MMDDYYYY NATURE OF INJURIES	
]	ON DOTT STATUS ATTUMENT THESTIT. LISTED USE CLASS	
]	LICENSE PLATE # VIN#	
]]	TRAILER PLATE # STATE TRAILER PLATE # STATE	
	VEH. YEAR MAKE MODEL STYLE VEHICLE TOWED BY GOVT. VEHICLE NO YES NO	
	REGISTERED OWNER INFO. SHADE IN DAMAGED AREA 2 3 4	1
	LIABILITY INSURANCE INSURANCE ON SPOLICE # SPO	
Ш	VEHICLE YES NO CITATION # CHARGE CHAR	
	N. ADAMS 07-09-16 02:48 PM	
	INVESTIGATING OFFICER'S SIGNATURE UNIT OR DIST DET DATED: PLACE SIGNED	
	BADGE OR ID # WA0311900 APPROVED BY SUMMERS DATE OF 4	

REPORT NO. E563154

CASE # 2016-00013264

DATE AND TIME 07/09/16 13:05





LAKE STEVENS POLICE DEPARTMENT

INCIDENT STATEMENT FORM

CASE NUMBER 2016-60013264

Page ____ OF _____

WITNESS X	NON-DISCLOSURE
NAME (LAST, FIRST, MIDDLE RACE ETHNICITY SEX D.O.B. AGI	
Martine 2, Snelby D mora F 5/10/87/20	
STREET ADDRESS	STATE ZIP
HOME PHONE CELL PHONE	IS WA 98258
LATE PLO 2165	HONE
EMAIL ADDDECC (ODTIONAL)	BOUS HOUSE IN MY SC
I RLACE OF	EMPLOYMENT Side Ale House
STATEMENTS	rac ALL FLOWS
White Built was honking & pulled over	to the
Showaer beside the Adiatic Desticoun	nt - When
Should Carried Description Programmes	
Siver carry passed they honked be	then tollared
Controlled to Control	when there
was a blue truck brokeng beag	7 bound on
20th of he They attempted to go	around in
me west bound lane tritting the	truel.
Silver Cornery her The trycle.	
0	
I CERTIFY (OR DECLARE) UNDER PENALTY OF PURJURY UNDER THE STATE OF WASHINGTON THAT THE FOREG	GOING IS TRUE AND CORRECT
SIGNATURE: () LUBY	DATE SIGNED:
OFFICER/NUMBER:	07/09/2016
-dame #127	DATE SIGNED: 67/09//6
OUR MISSION STATEMENT: "WE BELIEVE THAT PRESERVING LIFE, ENSURING JUSTICE AND GUARDING DEN	MOCRACY ARE VITAL TO A SAFE
HEALTHY, AND PROSPEROUS COMMUNITY"	